Approved for use through 04/30/2009; OMB 3651-0016
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1955, no persons are required to respond to a collection of information unless it displays a valid CMB control number

## "FEE ADDRESS" INDICATION FORM

Address to: Mail Stop M Correspondence Commissioner for Patents - OR - P.O. Box 1450 Alexandria, VA 22313-1450	Fax to: 571-273-6500
Monardia, VII Exc 10-1400	
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number to represent the fee address. When to check the second box below: If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.	
For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
Customer Number: 000031111	
OR	
The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
6,814,752	09/780,943
Completed by (check one):	
Applicant/Inventor	Nuta fait
Attorney or Agent of record (Reg. No.)	Victoria Poissant Typed or printed name
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	3.71. 661-949-4553 Requester's telephone number
Assignee recorded at Reel Frame	4/29/2010
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
Total of 4 forms are submitted.	

This collection of information is required by 37 CFR 1 363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U S C 122 and 37 CFR 111 and 114. This collection is estimated to take 5 minutes to complete, including gathering, oreparing, and submitting the completed application form to the USPTO. Thin will vary depending upon the individual case Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burder, should be sert to the Chief Information Officer, U.S. Posentian (I.S. Patient) and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 2231-1450. DOMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 2231-31-4460.